	John T.	-	Frans	way
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A557 34

Candidate's Name (print)

Office

District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK.✓ IF IN KIND
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John T. Frangway

Candidate's Name (print)

Office

District (if applicable)

Contributions of \$100 or less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	DATE OF EACH CONTRIBUT	OF EACH
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PAGE 3 OF 6

John J.	Transway	1-55434
Candidate's Name (print)	Office	Dis cric t (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
Mo	nl_		

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John J. Frans Way
Candidate's Name (print) Office

District (if applicable)

Expenses Categories

CATEGORIES :	CODE	TOTALS *-
Office expenses	A	
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	Н	
Goods and services provided in kind for which money would otherwise have been paid	ľ	
Other miscellaneous expenses	J	

Jan T.	franoway	AS 4 34
Candidate's Name (print)	/ Office	District (if applicable)

Expenses of \$100 or Less

DATE OF EACH EXPENDITURE	AMOUNT OF EACH **** EXPENDITURE	CATEGORY		DATE OF EACH EXPENDITURE	AMOUNT OF EACH EXPENDITURE	*CATEGÓRY: *
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